

THE SECRETARY FOR HEALTH SERVICES COMMONWEALTH OF KENTUCKY 275 EAST MAIN STREET FRANKFORT, KENTUCKY 40621-0001 (502) 564-7042 (502) 564-7091 FAX

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Advanced Registered Nurse Practitioner Letter #A-66 Community Mental Health Center Provider Letter #A-55 Dental Provider Letter #A-130 Hospice Provider Letter #A-183 Hospital Provider Letter #A-183 ICF/MR/DD Provider Letter #A-323 Mental Hospital Provider Letter #A-70 Nursing Facility Provider Letter #A-174 Physician Provider Letter #A-326
Physician Assistant Provider Letter #A-12
Podiatrist Provider Letter #A-164
Preventive Health Provider Letter #A-13
Primary Care Provider Letter #A-334
Psychiatric Residential Treatment Facility Letter #A-13
Rural Health Provider Letter #A-186
Vision Provider Letter #A-128

Dear Medicaid Provider:

Effective August 1, 2002, in accordance with recently enacted legislation, some Medicaid and KCHIP recipients will be responsible for a \$1.00 pharmacy co-payment for each prescription. The following individuals, however, will be exempt from the \$1.00 co-payment:

- Individuals under age 18 years
- Pregnant women and women during the 60-day postpartum period following delivery
- Residents of a nursing facility, personal care home, or intermediate care facility for people with mental retardation (ICF/MR)
- Individuals receiving hospice services
- Foster children in state custody

For Passport Health Plan members in the 16-county greater Louisville area, the co-payment will **only** be applicable to prescriptions that are not covered by Passport (i.e., drugs prescribed by a psychiatrist).

Additionally, the Cabinet is required by federal law to exempt contraceptives from co-payment requirements.

Medicaid's web site at *http://chs.state.ky.us/dms/* has been expanded to provide more information about the Medicaid Pharmacy Program and other Medicaid programs. You are encouraged to use this web site.

If you have any questions, please contact the Division of Managed Care at 502-564-7940.

Sincerely,

Marcia R. Morgan

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Secretary



